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Express Mail" mailing label number: RB829250543US Date of Deposit: January 12, 1993

I hereby certify that this New Patent Application and Fee is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 C.F.R. \$1.10 on the date indicated above and is addressed to the Commissioner of Patents and Trademarks,

Dated: 1/12/93 Lillian Smith ROOM

Form P70 1083

PRADE

In re application of Harold Kohn, et al.

Serial No.: Unassigned

Filed: Herewith

For: AMINO ACID DERIVATIVE ANTICONVULSANT

The Commissioner of Patents and Trademarks Washington, DC 20231

Case Docket No. 5352ZYXI-IIWV

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small entity status of this application under 37 C.F.R. §§1.9 and 1.27 has been established by a verified statement previously submitted.
- [] A verified statement to establish small entity status under 37 C.F.R. §§1.9 and 1.27 is enclosed.
- [] No additional fee is required.

The fee has been calculated as shown below:

	(COL. 1)	(Col. 2)	(Col. 3)	
	Claims Remaining After Amendment	Highest No. Previously Paid For	Present Extra	
TOTAL	* 312 _.	** 304	= 8	
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[] Fi	rst Presentat	ion of Multiple	Dep. Claim	

SMALL ENTITY

STEED BRITIS				
Rate		Addit. Fee		
x	11	\$	0	
×	37	\$	0	
+	115	\$	0	
Total		\$	0	

OTHER THAN A SMALL ENTITY

Rate		Addit. Fee
x	22	\$ 176
x	74	\$ 0
+	230	\$ ₀
Total		\$ 176

- If the entry in Col. 1 is less than the entry in Col. 2, write "O" in Col. 3.
- If the "Highest Previously Paid For" in this space is less than 20, write "20" in this space.
- If the "Highest Previously Paid For" in this space is less than 3, write "3" in this space.

The "Highest Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- [X] Please charge Deposit Account No. 19-3886 in the amount of 176.00 . A duplicate copy of this sheet is attached.
- [] A check in the amount of \$__
- [X] The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 19-3886duplicate copy of this sheet is attached.

[$^{\rm X}$] Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.

[X] Any patent application processing fees under 37 C.F.R. \$1.17.

Scully, Scott, Murphy & Presser 400 Garden City Plaza Garden City, NY (516) 742-4343

Respectfully submitted,

1/3886 08/23/95 KQHN1U/93 103 176.00CH 53522YX1IIWU Date

Mark A. Cohen Reg. No. 32,211